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David Henry P.O. Box 1470 Waco, TX 76703-1470

## 05/18/2005 BABRAHA2 00000080 10649349

01 FC:2501 02 FC:1504 700.00 OP 300.00 OP

SMALL ENTITY



**ISSUE FEE** 

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| David Henry   | (Depositor's name) |
|---------------|--------------------|
| /David Henry/ | (Signature)        |
| 05/13/05      | (Date)             |
| 03/13/03      |                    |

TOTAL FEE(S) DUE

DATE DUE

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/649,349      | 08/26/2003  | <br>Dennis Remmers   | Remmers Sawhorse    | 4172             |

TITLE OF INVENTION:

APPLN. TYPE

| nonprovisional   | yes   | \$700   |  | \$300   | \$1000                                | 06/06/2005                          |
|--|---|---|--|---|---------------------------------------|-------------------------------------|
| EXAMIN   | ER  | ART UN  | TT   | CLASS-SUBCLASS  |                                       |                                     |
| 1. Change of correspondence a CFR 1.363).  Change of corresponden Address form PTO/SB/122)  "Fee Address" indication PTO/SB/47; Rev 03-02 or n Number is required. | ce address (or Change o<br>attached.<br>n (or "Fee Address" Indi<br>nore recent) attached. Us | f Correspondence cation form se of a Customer | (1) the nation or agents (2) the nation registered 2 registered listed, no | inting on the patent front page, list ames of up to 3 registered patent OR, alternatively, ame of a single firm (having as a d attorney or agent) and the name red patent attorneys or agents. If n name will be printed. | attorneys 1_Da  member a 2 s of up to | avid Henry                          |
| 3. ASSIGNEE NAME AND R   |   |   |  |   | e is identified bel                   | low, the document has been filed fo |

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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|--|--|
| Issue Fee  | A check in the amount of the fee(s) is enclosed.   |
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| Advance Order - # of Copies  | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  |
| 5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  | ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).   |
| Fig. 1. Fig. 2. Fig. 1. Fig. 1. Fig. 1. Fig. 1. Fig. 2. Fig. 1. Fig. 1 | lication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office. |

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